

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

Attorney Docket No.: **GS 145 D1**
 First Inventor: **Fwu-luan Hshieh et al.**
 Title: **TRENCH DMOS DEVICE WITH IMPROVED DRAIN CONTACT**
 Express Mail Label No.: **ER 638135318 US**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS
 (see MPEP chapter 600 concerning
 utility patent application contents)

ADDRESS TO: Mail Stop Patent Application
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

- | | |
|---|--|
| <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form in duplicate
 (Submit an original and a duplicate for fee processing)</p> <p>2. <input type="checkbox"/> Applicant claims small entity status
 See 37 CFR 1.27</p> <p>3. <input checked="" type="checkbox"/> Specification Total Pages 16
 (preferred arrangement set forth below)
 -Descriptive title of the invention
 -Cross Reference to Related Applications
 -Statement Regarding Fed sponsored R&D
 -Reference to sequence listing, a table,
 -Background of the Invention
 -Brief Summary of the Invention
 -Brief Description of the Drawings (if filed)
 -Detailed Description
 -Claim(s)
 -Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> Drawing(s) Total Sheets 12</p> <p>5. Oath or Declaration
 a. <input type="checkbox"/> Newly executed (original or copy)
 b. <input checked="" type="checkbox"/> Copy from a prior application (37
 CFR 1.63(d)) (for continuation/ divisional with
 Box 18 completed)
 i. <input type="checkbox"/> DELETION OF INVENTOR(S)
 Signed statement attached deleting
 inventor(s) named in the prior application,
 see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input type="checkbox"/> Application Data Sheet under 37 CFR 1.76</p> | <p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large
 table or Computer Program (Appendix)</p> <p>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence
 (if applicable, all necessary)
 a. <input type="checkbox"/> Computer Readable Form (CFR)
 b. <input type="checkbox"/> Specification Sequence Listing on:
 i. <input type="checkbox"/> CD-ROM or CD-4 (2 copies);
 ii. <input type="checkbox"/> or paper
 c. <input type="checkbox"/> Statements verifying identify of above copies</p> |
|---|--|

ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) ☒ Power of Attorney
 Statement (when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☒ IDS ☐ Copies of IDS Citations
13. ☒ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)
15. ☐ Certified Copy of Priority Document
16. ☐ Nonpublication Request under 35 U.S.C.
 122(b)(2)(B)(i). Applicant must attach form
 PTO/SB/35 or its equivalent.
17. ☐ Other: _____

18. IF A CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment:

☐ Continuation ☒ Divisional ☐ Continuation-in- Part (CIP) Prior Appl. No. **10/021,419**

Prior Appl. information: Examiner: **PHAT X. CAO** Group/Art Unit: **2814**

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label **27774** or ☐ Correspondence address below

Name	Karin L. Williams				
Address	Mayer Fortkort & Williams, PC				
	251 North Avenue West, 2 nd Floor				
City	Westfield	State	NJ	Zip Code	07090
Country	USA	Telephone	908-518-7700	Fax	908-518-7795
Name	Karin L. Williams	Registration No.	36,721		
SIGNATURE	<i>Karin L. Williams</i>		Date	12/1/03	

19587 U.S. PTO
10/725326



FEE TRANSMITTAL

Patent fees are subject to annual revision

Complete if Known

Application Number Unassigned
 Filing Date Filed Herewith
 First Named Inventor Fwu-luan Hshieh et al.
 Examiner Name Unassigned
 Group Art Unit 2814
 Attorney Docket No. GS 145 D1

TOTAL AMOUNT OF PAYMENT (\$)**770**

METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:

Deposit Account Number **50-1047**Deposit Account Name **Mayer Fortkort & Williams**

- ☒ Charge Any Additional Fee required under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☐ Payment Enclosed:

☐ Check ☐ Credit Card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Paid
1001	770	2001	385	Utility filing fee 770
1002	340	2002	170	Design filing fee
1003	530	2003	265	Plant filing fee
1004	770	2004	385	Reissue filing fee
1005	160	2005	80	Provisional filing fee

SUBTOTAL (1) (\$)**770**

2. EXTRA CLAIM FEES

Total Claims	Previously Paid**	Extra Claims	Fee from below	Fee Paid
7	20	0	18	0
Independent Claims	1	3	86	0

Multiple Dependent

280 =

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	280	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	* Reissue independent claims over original patent
1205	18	2205	9	* Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

**OR NUMBER PREVIOUSLY PAID, IF GREATER THAN STANDARD ALLOWANCE.

*For Reissues, see above

SUBMITTED BY

Name (Print/Type) **Karin L. Williams**

Signature

*Karin L. Williams*Registration No. **36,721**

Telephone

908-518-7700

Date

12/1/03

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description
1051	130	2051	65	Surcharge - late filing fee or oath
1052	50	2052	25	Surcharge - late Provisional filing
1053	130	1053	130	Non-English specification
147	2520	147	2520	For filing a request for ex parte Reexamination
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action
1805	1840*	1805	1840*	Requesting publication of SIR after Examiner action
1251	110	2251	55	Extension for reply within first month
1252	420	2252	210	Extension for reply within second month
1253	950	2253	475	Extension for reply within third month
1254	1480	2254	740	Extension for reply within fourth month
1255	2010	2255	1005	Extension for reply within fifth month
1401	330	2401	165	Notice of Appeal
1402	330	2402	165	Filing a brief in support of an appeal
1403	290	2403	145	Request for oral hearing
1451	1510	1451	1510	Petition to institute a public use proceeding
1452	1330	2452	665	Petition to revive - unavoidable
1453	1330	2453	665	Petition to revive - unintentional
1501	1330	2501	665	Utility issue fee (or reissue)
1502	480	2502	240	Design issue fee
1503	640	2503	320	Plant issue fee
1460	130	1460	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)
1806	180	1806	180	Submission of IDS
8021	40	8021	40	Recording each patent assignment per property (times number of properties)
1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))
1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))
1801	770	2801	385	Request for Continued Examination (RCE)
1802	900	1802	900	Request for expedited examination of a design application

Other fee (specify)

* Reduced by Basic Filing Fee paid

SUBTOTAL (3)

(\$)

Complete (if applicable)

CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10)

Applicant(s): Fwu-Iuan Hshieh et al.

Docket No.

GS 145 D1

Serial No.
UnassignedFiling Date
Filed HerewithExaminer
UnassignedGroup Art Unit
2814

Invention: TRENCH DMOS DEVICE WITH IMPROVED DRAIN CONTACT

I hereby certify that the following correspondence:

New U.S. Divisional Patent Application

(Identify type of correspondence)

is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

12/1/03
(Date)

Marjorie Scariati*(Typed or Printed Name of Person Mailing Correspondence)*

Marjorie Scariati
(Signature of Person Mailing Correspondence)

ER 638135318 US*("Express Mail" Mailing Label Number)***Note: Each paper must have its own certificate of mailing.**